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CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****RECEIVED
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Attn: Examiner Shengjun Wang****Fax No. (703) 872-9306****Phone No. (703) 308-4554**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on November 3, 2004, to the above-identified facsimile number.

 (Signature)**FROM: Juliet A. Jones (Typed or printed name of person signing Certificate)****Fax No. (513) 626-1355****Phone No. (513) 626-2127**

Listed below are the item(s) being submitted with
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Number of Pages Including this Page: 11

- 1) Transmittal for Response;
- 2) Response (9) pages;

Inventor(s): Resch et al.
S.N.: 10/090,517
Filed: 03/04/2002
Conf. No.: 6459
Case: 8866.

Comments:

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**IN THE UNITED STATES PATENT & TRADEMARK OFFICE
RESPONSE/AMENDMENT**

Mail Stop AF
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 10/090,517
Applicant(s) : B.S. Resch et al.
Filed : March 4, 2002
Title : Stable Personal Care Compositions
Containing a Retinoid
TC/A.U. : 1617
Examiner : Shengjun Wang
Conf. No. : 6459
Docket No. : 8866
Customer No. : 27752

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1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)	OTHER THAN A SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA*	
TOTAL	* 26	MINUS	** 26	=	0	x \$18 = \$0.00
INDEP.	* 03	MINUS	*** 03	=	0	x \$86 = \$0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+ \$290 = \$0.00
						TOTAL \$0.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

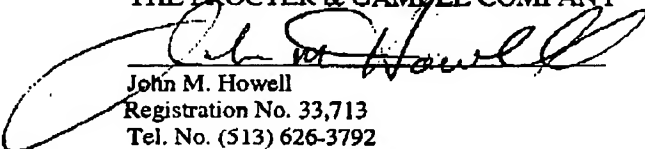
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
 - a. ☒ Any patent application processing fees under 37 CFR §1.16.
 - b. ☒ Any patent application processing fees under 37 CFR §1.17.
4. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

THE PROCTER & GAMBLE COMPANY


John M. Howell
Registration No. 33,713
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November 3, 2004

Customer No. 27752

THE UNITED STATES PATENT AND TRADEMARK OFFICE

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REPLY AFTER FINAL OFFICE ACTION UNDER 37 CFR §1.113

Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450
Dear Sir:

INTRODUCTORY REMARKS

In response to the Office Action of September 3, 2004, please consider the following remarks and reconsider the application.

Remarks begin on page 2 of this paper.